| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | SC | | 7/30/9/ |
| O.I.P.E. CLASSIFIER | | 25 | 07-30-98 |
| FORMALITY REVIEW | | 71698 | 8/7 |

## INDEX OF CLAIMS

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| ✔ | Rejected | | N | | Non-elected |
| = | Allowed | | I | | Interference |
| – | (Through numeral) Canceled | | A | | Appeal |
| ÷ | Restricted | | O | | Objected |

SECTOR

| Claim (Final / Original) | Date | | | | | | | Claim (Final / Original) | Date | Claim (Final / Original) | Date |
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If more than 150 claims or 10 actions
staple additional sheet her

(LEFT INSIDE)